

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
2011 JAN 10 AM 8:30

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TP

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Allevato Sam

2011 JAN -5 A 9:38
CITY CLERK
SAN JUAN CAPISTRANO

1. Office, Agency, or Court

Agency Name

City of San Juan Capistrano

Division, Board, Department, District, if applicable

Your Position

City Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: Listed on Attached Separate Sheet

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of San Juan Capistrano

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year ____ Office sought, if different than Part 1: ____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed January 4, 2011
(month, day, year)

Signature

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FAIR POLITICAL
PRACTICES COMMISSION
SCHEDULE C
Income, Loans, & Business
Positions
2011 JAN 10 AM 8:31
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Sam Allevato

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Forde & Mollich

ADDRESS (Business Address Acceptable)

4041 MaCarthur Blvd. Newport Beach, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

OC Great Park Project

YOUR BUSINESS POSITION

Consultant

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
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CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments:

STATEMENT OF ECONOMIC INTEREST
FORM 700

Annual Statement: January 1, 2010 through December 31, 2010
NAME: Sam Allevato

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FAIR POLITICAL
PRACTICES COMMISSION

2010 JAN 10 AM 8:31

EXPANDED STATEMENT INCLUDES THE FOLLOWING AGENCIES & POSITIONS

Agency	Position Title	Type of Statement
California Joint Powers Insurance Authority	Member	Leaving Office: 12/10/10
Orange County Fire Authority (OCFA)	Board Member	Annual
Orange County League of Cities	Alternate Board Member	Leaving Office: 12/10/10
San Juan Capistrano Community Redevelopment Agency	Director	Annual
San Juan Capistrano Financing Authority	Director	Annual
Transportation Corridor Agencies – Foothill/Eastern (241 Toll Road) – San Joaquin Hills (73 Toll Road)	Board Member	Annual
Sewer Maintenance District #1	Director	Annual
Orange County Library Advisory Board	Alternate Board Member	Leaving Office: 12/10/10
Southern California Association of Governments	Member	Annual
Orange County Transportation Authority (OCTA) GMA 9 & 11	Alternate Representative	Assuming Office: 12/10/10